

PART B - FEE(S) TRANSMITTAL

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000572 7590 09/10/2004

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Linda C. LaCone	(Depositor's name)
<i>Linda C. LaCone</i>	
(Signature)	
November 10, 2004	
(Date)	

11/16/2004 WABDELR3 00000010 10658573

01 FC:2501 685.00 OP
02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/658,573	09/09/2003	Michael J. Miller	40055-15	3404

TITLE OF INVENTION: SILK SCREEN ASSEMBLY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	12/10/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
FERGUSON, MARISSA L	2854	101-127000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Clifford A. Poff

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Miller Screen & Design, Inc.

Mars, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.

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Authorized Signature Clifford A. Poff

Date November 10, 2004

Typed or printed name Clifford A. Poff

Registration No. 24,764

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